

# BOOK REVIEWS

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**The Breast: Comprehensive Management of Benign and Malignant Diseases.** Kirby I. Bland and Edward M. Copeland, III. 1154 pp. Philadelphia: Lea & Febiger, 1991. \$150.00.

BREAST CANCER is one of the most common cancers affecting women in the United States, and recent advances in diagnosis, surgical management, radiotherapy, adjuvant chemotherapy, and hormonal therapy have led to the need for a comprehensive monograph about management of breast disorders. Fortunately, *The Breast*, edited by Kirby I. Bland and Edward M. Copeland, III, admirably fills this need for an up-to-date and comprehensive overview.

The editors of this monograph are to be congratulated in organizing 170 contributors to produce a 1100-page monograph that is not only comprehensive but uniformly written and direct in discussing controversial issues. The book begins with chapters on the history of breast disorders and their treatment, and the anatomy and physiology of the normal and lactating breast. Its comprehensive nature is apparent in chapters on the design and conduct of clinical trials for breast cancer, the role of oncogenes in human breast cancer, and the role of rehabilitation and psychosocial problems associated with the diagnosis and treatment of breast cancer. These chapters highlight the broad range of topics included in this text; however, there are in-depth discussions in each of the 55 chapters.

The authors and editors have devoted a considerable portion of the text to the early detection and treatment of stage I and stage II breast cancer, because these are areas of ongoing clinical research. These chapters include detailed discussions of conservative *versus* radical procedures with adjuvant radiation therapy and postoperative radiation therapy, along with detailed discussions about the randomized clinical trials leading to the advocacy of breast conservation therapy. The editors have chosen well-respected international authorities to discuss these topics and the major studies leading to current recommendations for the management of early breast cancer. A timely comprehensive bibliography is present in each of the chapters as well.

For the physician and the surgeon who deal with disorders of the breast, this monograph is an essential requirement. There are complete discussions of not only the major issues in breast cancer, but also of the small nuances in management of women with breast disorders including infections, nipple discharge, and breast pain.

One can predict with confidence that this monograph by Bland and Copeland will become a standard bearer among monographs addressing disorders of the breast. It can be recommended with enthusiasm for the internist, radiation oncologist, and gynecologist, as well as for all surgeons.

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**Raynaud's Syndrome.** Ernest D. Cooke, Andrew N. Nicolaides, and John M. Porter. 215 pp. London: Med-Orion Publishing Co., 1991. \$95.00.

THIS IS A WELCOME BOOK on a subject that physicians and vascular surgeons alike believe that they understand to some extent, but would like to understand better. How to investigate and how to treat the condition is, clearly, a much easier problem than precisely what the condition is.

The investigation of Raynaud's syndrome by Doppler ultrasound and the effect of cooling and warming the digit is very well described. The thermographic images are particularly beautiful color depictions of these investigations. The chapters on thermal entrainment and laser Doppler flowmetry are also welcome as a valuable addition to the library.

Modern-day treatment of Raynaud's syndrome is covered well in the concluding chapters of the book, wisely giving the chapter on natural history before examining the effects with different groups of drugs on the condition.

The most controversial portion of the book is the very title, *Raynaud's Syndrome*. Mr. Eastcott first refers to Maurice Raynaud's thoughts in 1862 in the Foreword, but he avoided the use of the word "syndrome." In the preface, written by the editors, again it is mentioned that the condition was described in 1862 and it was referred to there as Raynaud's syndrome, and later it is explained that throughout the volume the term "Raynaud's phenomenon" is used to mean the event of digital changes in color and sensation. Raynaud's syndrome is used for the condition that encompasses the phenomenon, its associated complications, and the underlying pathophysiology. It is quite clear that in 1862, Raynaud did not have the information of the many associated findings with the condition that he described and so whether the term disease, phenomenon, or syndrome is used and for what, in association with Raynaud's name, must be controversial. In the chapter by Edwards and Porter on Associated Diseases, they propose the abandonment of the terms Raynaud's Disease and Raynaud's Phenomenon and state the following:

"Instead, we classify all patients with episodic digital ischaemia as having Raynaud's syndrome and understand that a portion of the patients currently have an associated disease; that a few will later develop such a disease; and that the remainder will never manifest an associated disease."

Certainly, this book will make us think about what Raynaud personally described and, accordingly, what should be associated with his name and the authors of the chapters and the editors bring this matter to the fore.

Surgical management of Raynaud's phenomenon is a conspicuously absent chapter. This is not to imply that surgery is the first line of treatment for this condition, but, undoubtedly, sympathectomy is being performed in many parts of the world